

400 Garden City Plaza -- Suite 300  
Garden City, New York 11530  
(516) 742-4343 - Telephone  
(516) 742-4366 - Facsimile  
e-mail: [intrap@ssmp.com](mailto:intrap@ssmp.com)

**SCULLY, SCOTT, MURPHY  
& PRESSER**

# Fax

RECEIVED  
CENTRAL FAX CENTER  
NOV 22 2004

<b>To:</b>	Examiner Joseph R. Maiwang	<b>From:</b>	William C. Roch
<b>Fax:</b>	703-872-9306	<b>Pages:</b>	19 pages including cover sheet
<b>Phone:</b>		<b>Date:</b>	11/22/2004
<b>Re:</b>	U.S. Application No: 09/746,236 Group Art Unit: 2144 Confirmation No: 2689 Docket No: JP919990254US1 (18195)		
<b>CC:</b>			

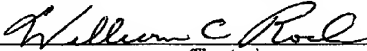
☐ Urgent    ☐ For Review    ☐ Please Comment    ☐ Please Reply    ☐ Please Recycle

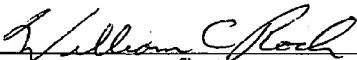
• **Attached hereto:**

1. Certificate of Transmission by Facsimile
2. Amendment Transmittal Letter (in duplicate)
3. Amendment Under 37 C.F.R. §1.111


**CONFIDENTIALITY:** The documents accompanying this facsimile transmission may contain information which is either confidential or legally privileged and is intended only for the authorized use of the individual or entity named above without right or publication or republication, dissemination or disclosure except as expressly set forth or established by course of dealing. All rights are reserved. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or use of the contents of this facsimile is prohibited. If you received this transmission in error, please notify us immediately by telephone to arrange for return of the documents.

If you have any problems concerning this facsimile, please call (516) 742-4343 and ask for Grace Colucci at ext. 590 or via e-mail at [gcolucci@ssmp.com](mailto:gcolucci@ssmp.com).

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No.	
Applicant(s): Yoshinori Hijkata, et al.		JP919990254US1 (18195)	
Application No. 09/746,236	Filing Date December 22, 2000	Examiner Joseph R. Maniwang	Group Art Unit 2144
Invention: INFORMATION EXTRACTION SYSTEM, INFORMATION PROCESSING APPARATUS, INFORMATION COLLECTION APPARATUS, CHARACTER STRING EXTRACTION METHOD, AND STORAGE MEDIUM			
I hereby certify that this AMENDMENT UNDER 37 C.F.R. §1.111 (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-872-9306) on November 22, 2004 (Date)  William C. Roch (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>JP919990254US1 (18195)</b>	
Applicant(s): <b>Yoshinori Hijikata, et al.</b>						
Application No. <b>09/746,236</b>	Filing Date <b>December 22, 2000</b>	Examiner <b>Joseph R. Maniawang</b>	Customer No. <b>23389</b>	Group Art Unit <b>2144</b>	Confirmation No. <b>2689</b>	
Invention: <b>INFORMATION EXTRACTION SYSTEM, INFORMATION PROCESSING APPARATUS, INFORMATION COLLECTION APPARATUS, CHARACTER STRING EXTRACTION METHOD, AND STORAGE MEDIUM</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	16 -	21 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	7 -	10 =	0 x	\$88.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>50-0510/IBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature <b>William C. Roch</b> Registration No. 24,972			Dated: <b>November 22, 2004</b>			
CC:			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			

P11LARGE/REV08

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>JP919990254US1 (18195)</b>	
Applicant(s): <b>Yoshinori Hijikata, et al.</b>						
Application No. <b>09/746,236</b>	Filing Date <b>December 22, 2000</b>	Examiner <b>Joseph R. Maniawang</b>	Customer No. <b>23389</b>	Group Art Unit <b>2144</b>	Confirmation No. <b>2689</b>	
Invention: <b>INFORMATION EXTRACTION SYSTEM, INFORMATION PROCESSING APPARATUS, INFORMATION COLLECTION APPARATUS, CHARACTER STRING EXTRACTION METHOD, AND STORAGE MEDIUM</b>						
<u><b>COMMISSIONER FOR PATENTS:</b></u>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	16 -	21 =	0 x	\$18.00	\$0.00	
INDEP. CLAIMS	7 -	10 =	0 x	\$88.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>50-0510/IBM</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: <b>November 22, 2004</b>			
<b>William C. Roch</b> <b>Registration No. 24,972</b>			<div style="border: 1px solid black; padding: 5px;">             I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____              (Date)              _____              Signature of Person Mailing Correspondence              _____              Typed or Printed Name of Person Mailing Correspondence           </div>			
CC:						

P11LARGE/REV08

RECEIVED  
CENTRAL FAX CENTER

:5167424366

# 5/ 16

NOV 22 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Applicant(s):** Yoshinori Hijikata, et al.**Examiner:** Joseph R. Maniawang**Serial No:** 09/746,236**Art Unit:** 2144**Filed:** December 22, 2000**Docket:** JP919990254US1 (18195)**For:** INFORMATION EXTRACTION SYSTEM,  
INFORMATION PROCESSING APPARATUS,  
INFORMATION COLLECTION APPARATUS,  
CHARACTER STRING EXTRACTION METHOD,  
AND STORAGE MEDIUM**Dated:** November 22, 2004**Confirmation No:** 2689Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**AMENDMENT UNDER 37 C.F.R. §1.111**

Sir:

Responsive to the Office Action of August 20, 2004, please amend this patent application as follows.

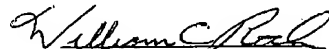
**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 11 of this paper.

---

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

**Dated:** November 22, 2004  
William C. Roch